## SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	

- Reminder you must mark the gift or income box.
- You are not required to report "income" from government agencies.

NAME OF SOURCE	➤ NAME OF SOURCE
ADDRESS	ADDRESS
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S):// AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
DESCRIPTION:	DESCRIPTION:
	.   -
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ADDRESS	ADDRESS
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
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Comments:	

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